
CASE CLOSURE PROCEDURES

There are specific actions that must occur when closing an adult services case.

Note: Adult services specialists may chose to suspend payments, and delay case closure, if it appears the situation may be temporary.

Termination of Home Help Payments

Home help services payments may be terminated and closing procedures initiated, in any of the following circumstances:

- The client fails to meet any of the eligibility requirements.
 - Medicaid eligible.
 - Medical professional does not certify a need for services on the DHS-54A, Medical Needs form.
 - Assessment determines client no longer requires home help services.
- The client no longer wishes to receive home help services.
- The client is receiving services from another program and this would result in a duplication of services.

Suspension of Home Help Payments

The adult services specialist may choose to suspend payments, rather than terminate payments and initiate closing procedures, in the following circumstances:

- Client's Medicaid has ended and it appears to be temporary.
- Client's provider fails to meet qualification criteria. This allows the client time to locate a new provider.

Note: Any suspended payment action must be temporary. The adult services specialist should allow no more than 90 days for the situation to be resolved. (The DHS-390, Adult Services Application

and the DHS-54A, Medical Needs form, are valid for 90 days after case closure). Case closure procedures should be initiated once it has been determined the situation that resulted in the suspension will not be resolved.

Notification of the Negative Action

When home help services are terminated, suspended or reduced for **any** reason, a DHS-1212, Advance Negative Action Notice, must be generated in **ASCAP** and sent to the client advising of the negative action and explaining the reason for the action; see ASM 150, Notification of Eligibility to determine need for 10 business day notice of action.

A copy of the DCH-0092, Request for Hearing form is automatically generated from ASCAP when the DHS-1212 is printed. This must be forwarded to the client with the negative action notice.

Administrative Hearing Requests

Clients have the option to request an administrative hearing on all negative actions.

If the client requests a hearing before the effective date of the negative action, and the specialist is made aware of the hearing request, continue payments until a hearing decision has been made. If the specialist is made aware of the hearing request after payments have ended, payments must be reinstated pending the outcome of the hearing. Offer the client the option of suspending payments until after the hearing decision.

Note: When payments are continued pending the outcome of a hearing, the client must repay any overpayments if the Department's negative action is upheld. Initiate recoupment procedures by sending the client a DHS-566.

ASCAP Procedures for Case Closure

All client information and corresponding screens must be updated in ASCAP prior to case closure. The **Disposition** module in **ASCAP** must be completed, including a **detailed** description of the reason for case closure.

Note: All payments **must be** ended before closing procedures have been completed.

Reopening a Services Case

If a case has closed and reopens within 90 days, a new DHS-390, Services Application and DHS-54A, Medical Needs form are **not** required.

Exception: If the reason for closure was due to a Medical Needs form that indicated the client did not require services, a new DHS-54A is required.

If the case was receiving expanded home help services at closure and required approval from the Long Term Care Policy Section, a new approval is not required (within 90 days) **unless** it is determined additional services are needed.

Note: The adult services specialist **must** conduct a face-to-face contact and complete an assessment prior to authorizing payment.